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FEB 27 2002

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

0010PTO
Rev. 6/95U.S. Department of Commerce
Patent and Trademark OfficeAttorney Docket
Number

H 4763

**DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION**First Named
Inventor

BUTZ, Wolfgang

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

COPY OF PAPERS
ORIGINALLY FILED☐ Declaration
Submitted
with Initial Filing OR ☒ Declaration
Submitted after
Initial Filing

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DEVICE FOR RECEIVING AND DISPENSING A COATABLE MATERIAL

the specification of which

(Title of the invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT InternationalApplication Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §305(b) of any foreign application(s) for patent or inventor's certificate, or §305(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO | |
|-------------------------------------|---------|----------------------------------|--------------------------|-------------------------------------|--------------------------|
| 100 54 984.5 | Germany | 11/07/2000 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto. |
|-----------------------|--------------------------|--|
| <input type="text"/> | <input type="text"/> | |

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| U.S. Parent Application Number | PCT Parent Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--------------------------------|-------------------|---------------------------------|--------------------------------------|
| | | | |

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As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label

OR

☒ List Attorney(s) and/or agent(s) name and registration number below:

| Name | Registration Number | Name | Registration Number |
|-------------------|---------------------|--------------------|---------------------|
| Wayne C. Jaeschke | 21,062 | Glenn E. J. Murphy | 33,539 |
| Kimberly R. Hild | 39,224 | Stephen D. Harper | 33,243 |

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number or label 00423 OR ☐ Fill in correspondence address below

| | | | | | | | | |
|---------|--|-----------|--------------|--|-------|--------------|-----|-------|
| Name | Glenn E. J. Murphy | | | | | | | |
| Address | Henkel Corporation - Patent Department | | | | | | | |
| Address | 2500 Renaissance Boulevard, Suite 200 | | | | | | | |
| City | Gulph Mills | | | | State | PA | ZIP | 19406 |
| Country | USA | Telephone | 610-278-4926 | | Fax | 610-278-6548 | | |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned

| | | | | | | | | |
|----------------------|------------------------|-------|----------------|---------|-------------|-------------|-----------------|---------------------|
| Given Name | Wolfgang | | Middle Initial | | Family Name | BUTZ | Suffix e.g. Jr. | |
| Inventor's Signature | <i>Wolfgang Butz</i> | | | | | Date | 3.02.01 | |
| Residence: City | Duesseldorf | State | | Country | Germany | Citizenship | Germany | |
| Post Office Address | Lichtenbroicher Weg 8a | | | | | | | |
| Post Office Address | | | | | | | | |
| City | 40472 Duesseldorf | State | | Zip | | Country | Germany | Applicant Authority |

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

| | | | | | | | |
|---|-----------------------------|-----------------------------|--|---|----------------|-----------------|----------|
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Peter | Middle Initial | | Family Name | GONZALEZ-KOEHN | Suffix e.g. Jr. | |
| Inventor's Signature | <i>Peter Gonzalez-KoeHN</i> | | | | | Date | 03.12.01 |
| Residence: City | Duesseldorf | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | | Fahrradstrasse 243 | | | | | |
| Post Office Address | | | | | | | |
| City | 40221 Duesseldorf | State | | Zip | | Country | Germany |
| Applicant Authority | | | | | | | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Axel Uwe | Middle Initial | | Family Name | KOCHLER | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | Juechen | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | | Pestalozzistrasse 33 | | | | | |
| Post Office Address | | | | | | | |
| City | 41363 Juechen | State | | Zip | | Country | Germany |
| Applicant Authority | | | | | | | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Peter | Middle Initial | | Family Name | KUKLIK | Suffix e.g. Jr. | |
| Inventor's Signature | <i>Peter Kuklik</i> | | | | | Date | 03.12.01 |
| Residence: City | Haan | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | | Praelat-Marschall-Strasse 2 | | | | | |
| Post Office Address | | | | | | | |
| City | 42781 Haan | State | | Zip | | Country | Germany |
| Applicant Authority | | | | | | | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Rainer | Middle Initial | | Family Name | DAHME | Suffix e.g. Jr. | |
| Inventor's Signature | <i>Rainer Dahme</i> | | | | | Date | 03.12.01 |
| Residence: City | Mettmann | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | | Gerhart-Hauptmann-Weg 1a | | | | | |
| Post Office Address | | | | | | | |
| City | 40822 Mettmann | State | | Zip | | Country | Germany |
| Applicant Authority | | | | | | | |
| <input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto | | | | | | | |

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|--|----------------|----------------|--|---|---------|---------------------|---------|
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Karsten | Middle Initial | | Family Name | WOLF | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | Wunstorf | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | Schlesierweg 9 | | | | | | |
| Post Office Address | | | | | | | |
| City | 31616 Wunstorf | State | | Zip | | Country | Germany |
| | | | | | | Applicant Authority | |
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(Title of the Invention)

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| 100 54 984.5 | Germany | 11/07/2000 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
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OR
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| Name | Registration Number | Name | Registration Number |
|---------------------------------------|---------------------|---|---------------------|
| Wayne C. Jaeschke Kimberly R. Hild | 21,062 39,224 | Glenn E. J. Murphy Stephen D. Harper | 33,539 33,243 |

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| | | | | | | | | |
|---------|--|--|-----------|--------------|-------|-----|--------------|-------|
| Name | Glenn E. J. Murphy | | | | | | | |
| Address | Henkel Corporation - Patent Department | | | | | | | |
| Address | 2500 Renaissance Boulevard, Suite 200 | | | | | | | |
| City | Gulph Mills | | | | State | PA | ZIP | 19406 |
| Country | USA | | Telephone | 610-278-4926 | | Fax | 610-278-6548 | |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned

| | | | | | | | |
|------------|----------|----------------|--|-------------|------|-----------------|--|
| Given Name | Wolfgang | Middle Initial | | Family Name | BUTZ | Suffix e.g. Jr. | |
|------------|----------|----------------|--|-------------|------|-----------------|--|

Inventor's Signature Date

| | | | | | | | |
|-----------------|-------------|-------|--|---------|---------|-------------|---------|
| Residence: City | Duesseldorf | State | | Country | Germany | Citizenship | Germany |
|-----------------|-------------|-------|--|---------|---------|-------------|---------|

Post Office Address

Post Office Address

| | | | | | | | | | |
|------|-------------------|-------|--|-----|--|---------|---------|---------------------|--|
| City | 40472 Duesseldorf | State | | Zip | | Country | Germany | Applicant Authority | |
|------|-------------------|-------|--|-----|--|---------|---------|---------------------|--|

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

| | | | | | | | |
|---|-----------------------------|----------------|--|---|----------------|---------------------|----------|
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Peter | Middle Initial | | Family Name | GONZALEZ-KOEHN | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | Duesseldorf | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | Fahrradstrasse 243 | | | | | | |
| Post Office Address | | | | | | | |
| City | 40221 Duesseldorf | State | | Zip | | Country | Germany |
| | | | | | | Applicant Authority | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Axel Uwe | Middle Initial | | Family Name | KOCHLER | Suffix e.g. Jr. | |
| Inventor's Signature | <i>Axel Uwe Kochler</i> | | | | | Date | 03.12.01 |
| Residence: City | Juechen | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | Pestalozzi-Strasse 33 | | | | | | |
| Post Office Address | | | | | | | |
| City | 41363 Juechen | State | | Zip | | Country | Germany |
| | | | | | | Applicant Authority | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Peter | Middle Initial | | Family Name | KUKLIK | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | Haan | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | Praelat-Marschall-Strasse 2 | | | | | | |
| Post Office Address | | | | | | | |
| City | 42781 Haan | State | | Zip | | Country | Germany |
| | | | | | | Applicant Authority | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Rainer | Middle Initial | | Family Name | DAHM | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | Mettmann | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | Ge.-hart-Hauptmann-Weg 1a | | | | | | |
| Post Office Address | | | | | | | |
| City | 40822 Mettmann | State | | Zip | | Country | Germany |
| | | | | | | Applicant Authority | |
| <input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto | | | | | | | |

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

| | | | | | | | |
|----------------------|----------------|----------------|--|-------------|---------|---------------------|---------|
| Given Name | Karsten | Middle Initial | | Family Name | WOLF | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | Wunstorf | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | Schlesierweg 9 | | | | | | |
| Post Office Address | | | | | | | |
| City | 31515 Wunstorf | State | | Zip | | Country | Germany |
| | | | | | | Applicant Authority | |

Name of Additional Joint Inventor, if any:

☐

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| | | | | | | | |
|----------------------|--|----------------|--|-------------|--|---------------------|--|
| Given Name | | Middle Initial | | Family Name | | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | | State | | Country | | Citizenship | |
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Attorney Docket Number

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First Named Inventor

BUTZ, Wolfgang

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DECLARATION

Page 2

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| | | | |
|---------|--|-----------|--------------|
| Name | Glenn E. J. Murphy | | |
| Address | Henkel Corporation - Patent Department | | |
| Address | 2500 Renaissance Boulevard, Suite 200 | | |
| City | Gulph Mills | State | PA |
| Country | USA | Telephone | 610-278-4926 |
| | | Fax | 610-278-6548 |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned

| | | | | | | | |
|----------------------|------------------------|----------------|--|-------------|---------|---------------------|---------|
| Given Name | Wolfgang | Middle Initial | | Family Name | BUTZ | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | Date | | |
| Residence: City | Duesseldorf | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | Lichtenbroicher Weg 8a | | | | | | |
| Post Office Address | | | | | | | |
| City | 40472 Duesseldorf | State | | Zip | | Country | Germany |
| | | | | | | Applicant Authority | |

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|-------|----------------|--|-------------|---------------|-----------------|--|
| Given Name | Peter | Middle Initial | | Family Name | ONZALEZ-KOEHN | Suffix e.g. Jr. | |
|------------|-------|----------------|--|-------------|---------------|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
|----------------------|--|------|--|

| | | | | | | | |
|-----------------|-------------|-------|--|---------|---------|-------------|---------|
| Residence: City | Duesseldorf | State | | Country | Germany | Citizenship | Germany |
|-----------------|-------------|-------|--|---------|---------|-------------|---------|

| | |
|---------------------|-----------------|
| Post Office Address | Fahrstrasse 243 |
|---------------------|-----------------|

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|---------------------|--|
| Post Office Address | |
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|------|-------------------|-------|--|-----|--|---------|---------|---------------------|--|
| City | 40221 Duesseldorf | State | | Zip | | Country | Germany | Applicant Authority | |
|------|-------------------|-------|--|-----|--|---------|---------|---------------------|--|

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|----------|----------------|--|-------------|---------|-----------------|--|
| Given Name | Axel Uwe | Middle Initial | | Family Name | KOCHLER | Suffix e.g. Jr. | |
|------------|----------|----------------|--|-------------|---------|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
|----------------------|--|------|--|

| | | | | | | | |
|-----------------|---------|-------|--|---------|---------|-------------|---------|
| Residence: City | Juechen | State | | Country | Germany | Citizenship | Germany |
|-----------------|---------|-------|--|---------|---------|-------------|---------|

| | |
|---------------------|----------------------|
| Post Office Address | Pestalozzistrasse 33 |
|---------------------|----------------------|

| | |
|---------------------|--|
| Post Office Address | |
|---------------------|--|

| | | | | | | | | | |
|------|---------------|-------|--|-----|--|---------|---------|---------------------|--|
| City | 41363 Juechen | State | | Zip | | Country | Germany | Applicant Authority | |
|------|---------------|-------|--|-----|--|---------|---------|---------------------|--|

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|-------|----------------|--|-------------|--------|-----------------|--|
| Given Name | Peter | Middle Initial | | Family Name | KUKLIK | Suffix e.g. Jr. | |
|------------|-------|----------------|--|-------------|--------|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
|----------------------|--|------|--|

| | | | | | | | |
|-----------------|------|-------|--|---------|---------|-------------|---------|
| Residence: City | Haan | State | | Country | Germany | Citizenship | Germany |
|-----------------|------|-------|--|---------|---------|-------------|---------|

| | |
|---------------------|-----------------------------|
| Post Office Address | Praelat-Marschall-Strasse 2 |
|---------------------|-----------------------------|

| | |
|---------------------|--|
| Post Office Address | |
|---------------------|--|

| | | | | | | | | | |
|------|------------|-------|--|-----|--|---------|---------|---------------------|--|
| City | 42781 Haan | State | | Zip | | Country | Germany | Applicant Authority | |
|------|------------|-------|--|-----|--|---------|---------|---------------------|--|

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|--------|----------------|--|-------------|------|-----------------|--|
| Given Name | Rainer | Middle Initial | | Family Name | DAHM | Suffix e.g. Jr. | |
|------------|--------|----------------|--|-------------|------|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
|----------------------|--|------|--|

| | | | | | | | |
|-----------------|----------|-------|--|---------|---------|-------------|---------|
| Residence: City | Mettmann | State | | Country | Germany | Citizenship | Germany |
|-----------------|----------|-------|--|---------|---------|-------------|---------|

| | |
|---------------------|--------------------------|
| Post Office Address | Gerhart-Hauptmann-Weg 1a |
|---------------------|--------------------------|

| | |
|---------------------|--|
| Post Office Address | |
|---------------------|--|

| | | | | | | | | | |
|------|----------------|-------|--|-----|--|---------|---------|---------------------|--|
| City | 40822 Mettmann | State | | Zip | | Country | Germany | Applicant Authority | |
|------|----------------|-------|--|-----|--|---------|---------|---------------------|--|

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

Given
Name

Karsten

Middle
InitialFamily
Name

WOLF

Suffix
e.g. Jr.Inventor's
Signature

Date

03.12.01

Residence:
City

Wunstorf

State

Country

Germany

Citizenship

Germany

Post Office Address

Schlesierweg 9

Post Office Address

City

31515 Wunstorf

State

Zip

Country

Germany

Applicant
Authority

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

Given
NameMiddle
InitialFamily
NameSuffix
e.g. Jr.Inventor's
Signature

Date

Residence:
City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

Zip

Country

Applicant
Authority

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

Given
NameMiddle
InitialFamily
NameSuffix
e.g. Jr.Inventor's
Signature

Date

Residence:
City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

Zip

Country

Applicant
Authority

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

Given
NameMiddle
InitialFamily
NameSuffix
e.g. Jr.Inventor's
Signature

Date

Residence:
City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

Zip

Country

Applicant
Authority☐

Additional inventors are being named on supplemental sheet(s) attached hereto